

ment of training-schools; our argument admits no room for changing conditions, unless we can introduce within our hospitals the erratic and uncertain system of household management, a state of affairs neither practicable nor desirable.

If training-schools placed their pupils for the entire period of service in the sick-rooms of private houses, could they be so trained for ward nurses? Surely not without a special course. Reverse the situation and it has much the same disadvantage. The training-school gives the nurse her entry into the field of private nursing, but she must learn to use her knowledge by practical test, and grow in a new soil the seed garnered in other harvests.

ARTISTIC NURSING

By MARY F. SEWALL

Graduate of Massachusetts General Hospital

IN the March number of *THE NURSING JOURNAL* I observe with interest certain questions from a correspondent signing herself "Yearling" in regard to the custom of older nurses in the matter of performing slight services of a character which cannot be strictly called nursing, such as the washing of diapers and taking the baby out in its carriage.

As the years go by any person actively employed in a definite work, such as nursing, will find that many of the ideas with which she started out are really delusions. Certain truths, gradually brought together and formulated from the results of many experiences, she will in time acquire, which will form the foundation of her working methods. One delusion which commonly afflicts beginners is that there is some intrinsic grandeur and nobility about nursing distinguishing it from other kinds of work; it is a popular one, with good historic background. We often hear the remark: "What a noble work yours is, sacrificing yourself to make others comfortable." But we know that we are not working for charity, but following an agreeable and lucrative employment. A second delusion might be called the "professional idea." This is founded on the fact that the technical training and superior education which is now expected of nurses has raised the work to the dignity of a profession. Many graduates seem to think that upholding this professional dignity is an end in itself.

The truth of the matter is that no work is in itself ennobling or

degrading; it takes its character entirely from the spirit and purpose of the worker. The nurse who goes at her work in the right spirit need not be troubled about doing things because they are not "professional" or "eustomary;" she will rather decide in her own mind whether doing the thing will further the purpose she has in view, the comfort and welfare of her patient, and if convinced that it will she will go ahead and do it whether it be washing diapers, washing windows or washing faces. In each case the act is performed with the distinct and definite purpose of removing from the patient's mind some worry or anxiety which was adding to her discomfort and which it was just as surely the nurse's duty to remove as it was to brush the crumbs out of the bed or straighten the wrinkles in the under sheet.

I remember once hearing a nurse tell of the spirited way in which she answered a householder who was trying to give her directions for regulating the drafts of the furnace. "I told him," she said, tossing her head at the thought of the terrible insult, "that it was no part of a trained nurse's work to run furnaces and I prided myself on not knowing how and did not wish to be shown by him." Yet what had she gained by her behavior in this matter? If the patient knew of it she was probably made unhappy at the thought of her husband's annoyance and also she would worry lest the house should grow cold during his absence and the children suffer in consequence, and the nurse herself in her own heart must have felt that she had been disagreeable and unaccommodating; as for the husband, he is probably added to the already long list of people who consider that the trained nurse is at best a necessary evil to be borne with philosophically as being only temporary.

I like to think that nursing is a kind of work particularly well adapted to bringing out what one might call artistic ability in the worker, because each case can be made to stand by itself as a separate piece of work—an artistic production, if the worker has the skill to make it so. She goes to her case with the definite object in view of making the patient comfortable and alleviating as far as lies in her power the unpleasant conditions incidental to sickness. She is armed with technical knowledge and has intelligence to direct her in the use of this knowledge so that she may apply it to the best advantage. She is mindful of all the little details which can help to bring about the result she is aiming at and will neglect nothing which will in any way, directly or indirectly, assist in accomplishing her purpose.

To show more exactly my meaning, I should like to describe a few imaginary cases. A nurse is called to an obstetrical case. The family

is small, consisting of a father and mother, and a child under two, besides the new baby. One general servant is kept. The mother when talking things over with the nurse during her preliminary call, will speak of the competence of Jane, a really valuable servant whom she hopes to be able to keep. She will also speak of little Alice, who is always good with Jane, though she had hoped that her mother could have been with her to look after things generally. Here the nurse will observe at once that the mother is worried about this older child and also not quite sure how Jane will behave, and she makes a mental note of the circumstances. After the confinement it develops that an extra laundress has been engaged to come once a week, but no special provision has been made for the washing of diapers. The nurse at once perceives that Jane, with the additional burden of the care of little Alice on her shoulders, is a person to be delicately handled and she will quietly and unostentatiously wash the diapers and flannels herself. She will also probably find that she has many spare minutes that she can devote to the "big baby," which little person is often quite forlorn under Jane's supervision and apt to miss her mother. The doing of these things will come about in a perfectly natural manner, and the nurse will notice that the effect on the patient is fully as beneficial as that of the baths and other treatment administered.

In another family there are several older children and a nurse-maid is kept, besides a cook and a laundress. Here the nurse will probably not wash the diapers, because she will see that there is another person in the house under whose department that sort of work will naturally fall, and she will above all things try to make her own work fit into the ways of the household. The mother may perhaps want the baby taken out for airings, the weather being warm. The nurse will probably express no unwillingness to do this, but will suggest as a method better suited to the age of the infant that he take his airing in his cot on the corner of the porch. In both cases the aim of the nurse is to secure her patient's comfort by herself working into the family routine and increasing, rather than interfering with, the harmonious effect. To do this successfully certainly calls for intelligence of a high order, a real artistic ability, which is only a fine perception of the fitness of things, and inclination to act accordingly.

There is a fragment of a story, read many years ago in a magazine, which has always staid in my mind as the best description I have ever read of good nursing, and I have often used it as a standard by which to test the quality of my own work. Perhaps it will not come in inappropriately here. The story begins with a mother lying in bed,

her new-born baby by her side. The room is hot and close, and filled with buzzing flies, the table is littered with unwashed dishes and miscellaneous articles, garments are strewn about on chairs and floor, left where they were dropped by heedless persons; the mother's eyes are shut tight to keep out the sight of the disorder she is unable to correct; then in comes the nurse escorted by half a dozen eager, noisy children, all scrambling to be the first to show her the wonderful new baby. She is large and calm, neatly dressed, with a low, quiet voice. In an indescribable way she gets the children out of the room, setting tasks for the older ones in the kitchen and elsewhere, suggesting a game for the younger ones to be played in the back yard; then she goes to work without hurry or fuss, putting her hands as it were by instinct on the things she wants to use, and in a short time the mother is bathed and made comfortable, the baby attended to and the room reduced to a state of order. "You are like a cool breeze from the mountains, Miss Smith," says the mother, "I am sure this room is forty degrees cooler than it was half an hour ago, and I feel like a different person already." Then, as the nurse leans over her, bathing her forehead with a cooling lotion, she whispers in a pleading voice, "There is a piece of beefsteak in the kitchen cupboard; do you suppose Lizzie could cook it for Alfred's dinner?" "Now, honey," says the nurse, "don't you worry about Alfred; we'll see that he doesn't starve," and presently she slips out of the room and in a few minutes the mother smells the broiling beefsteak. Soon the front door opens and shuts with a bang and her nerves stiffen in expectation of the hot, hungry husband bursting into her quiet room, but again the soft voice is heard in the hall, and a low laugh, and the heavy, creak-boots go by her door with elaborate attempts at stillness and a chair is drawn scrapingly up to the kitchen table, on which she sees in her mind's eye the tempting beefsteak and steaming coffee. Presently the husband, fed and comforted, puts his head in at her door with a smile and a few cheery words before going back to his work. The children have now gathered in the kitchen and the kettle of rice, done to a turn, dry and flaky, is turned out into a bowl under their eager inspection and Miss Smith sits down with them to a dinner of rice and milk, a bowl of which is shortly carried in to the invalid.

Dinner over, the two older girls wash the dishes and clear up the kitchen and the younger ones go back to their play in the yard. The baby is now awake and requiring attention and Miss Smith attends to his wants and tucks him up again in a gentle, masterful way which somehow conveys the impression to his undeveloped consciousness that things are all right, and wrinkling up his face in a funny way that little

babies have, he is off to sleep again. Now the nurse is looking about for something she doesn't seem to find. Oh, there it is, thrust under the table by the mother's trembling hand, when necessity compelled her at the last moment to drop her needle and go to bed. Miss Smith pulls out the large basket heaped with garments in various states of disrepair and with a contented smile seats herself in the low rocking-chair by the table and threads her needle. The mother watches her through half closed eyes, too weary to talk, yet with a feeling of comfort and well-being creeping over her as she observes the pile of neatly-folded and mended garments steadily increasing on the table while the chaotic heap in the basket steadily diminishes. It is as if some terrible incubus which has been weighing on her had been lifted. She turns over with a happy sigh and drops asleep.

Of course this is a very simple description of a nurse in a working man's family, but the principle is one which can well be applied to any and every case. In the homes of the rich, life is often exceedingly complicated and it is correspondingly difficult for the nurse to discover just what to do to bring about the environment which she feels will be most beneficial to her patient, but even in these cases much can be done by careful study and conscientious effort. Each case must be studied and managed entirely on its own merits and without reference to things done at other cases. After it is over there is nothing more helpful to a nurse than to carefully review in her own mind the case as a whole, and she will find that she is measuring and estimating the value of her work by the standard she has set herself for what I have called artistic nursing. She will not only congratulate herself on the fact that the patient has come safely through a severe sickness or a difficult confinement, greatly aided by her skill, but also she will say to herself, "This has been a good case, because somehow I managed to find so many ways in which to add to the comfort of the patient and the family, and when I came away they remarked that the event which they always dreaded as a time of calamity and general discomfort had turned out to be on the whole a rather agreeable episode." This is the very highest praise which a nurse can receive from a patient.

IN moving into the summer cottage something went wrong with the water supply, and in consequence every one wanted a drink of water. As with the invalid tea or coffee was out of the question, Rose, the colored cook, was told to bring a glass of milk. "Goway, honey; milk hain't a drink; hit's jus' a beverage."